



General Assembly

January Session, 2013

Amendment

LCO No. 6088

SB0086106088SD0

Offered by:
SEN. CRISCO, 17th Dist.

To: Subst. Senate Bill No. 861

File No. 33

Cal. No. 94

"AN ACT CONCERNING THE MODERNIZATION OF CERTAIN MEDICAL FORMS."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. (*Effective October 1, 2013*) (a) Not later than January 1,
4 2014, the Commissioner of Public Health shall develop uniform prior
5 authorization forms for health care services, including, but not limited
6 to, health care professional office visits, prescription drug benefits, and
7 imaging and other diagnostic or laboratory testing. The commissioner
8 shall seek input from health insurers, utilization review companies,
9 health care professionals and other stakeholders for the development
10 of such forms. The commissioner may develop different forms for
11 different health care services as the commissioner deems necessary or
12 appropriate.

13 (b) Any such forms shall (1) not exceed two pages, (2) be available in
14 paper format and electronic format, (3) be capable of being completed
15 and submitted electronically, and (4) be consistent with existing prior

16 authorization forms established by the Centers for Medicare and
 17 Medicaid Services and with any national standards pertaining to
 18 electronic prior authorization procedures.

19 (c) Upon developing such forms, the commissioner shall notify
 20 health insurers of the availability of such forms. Each health insurer
 21 shall notify and make such forms available to utilization review
 22 companies to which such insurer has delegated any utilization review
 23 activities and to health care professionals with whom such insurer has
 24 contracted to provide health care services to its insureds. Not later than
 25 one hundred eighty days after the commissioner provides such
 26 notification, each such health care professional shall use, and each
 27 health insurer or utilization review company that requires prior
 28 authorization for a health care service shall use and accept, such forms.
 29 If such insurer or company fails to accept a prior authorization form
 30 developed pursuant to this section, for which all required information
 31 is submitted, or such insurer or company fails to grant or deny such
 32 prior authorization within twenty-four hours of such insurer or
 33 company's receipt of such prior authorization request, such prior
 34 authorization shall be deemed granted.

35 (d) Nothing in this section shall prohibit a health insurer or
 36 utilization review company from using, in lieu of paper format, a prior
 37 authorization system that utilizes an Internet web site, an Internet-
 38 based portal or other electronic systems to access or submit a prior
 39 authorization form developed pursuant to this section."

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2013	New section